XNV 31-014 Mental Health in Primary Care: System Factors and Process of Care Outcomes

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Funding Period: October 1999 - September 2001

BACKGROUND / RATIONALE:

With funding from Pfizer Health Solutions Dr. Kirchner has been conducting a project that documents system characteristics and models of MH/SA service integration at all primary care sites with VISN 16. For this project, she is also developing automated process measures to assess key aspects of treatment of alcohol and depression within primary care, and to evaluate the effect of various organizational characteristics on these process measures.

OBJECTIVE(S):

Specific aims are to: 1) document the existing mechanisms by which mental health care is provided within VISN 16 Primary Care settings, describing the system characteristics and describe the primary care population served at each site, 2) define key process measures available in the Veterans Integrated System Technology and Architecture (VISTA), 3) evaluate the influence of variations in organizational characteristics on these process measures. Additionally, perceived training needs and barriers for delivering best practices will be identified among the healthcare providers.

METHODS:

Based on a literature review and information gathered in other projects a provider/site survey was developed to document the strategies being used to integrate MH/SA services in primary care. In December 2000, the survey was administered to the nurse manager at each VISN 16 PCC, in collaboration with VISN 16 leadership. Clinic specific process of care data will be extracted from VISTA using the VISN 16 data warehouse located in Little Rock and the relationship of organizational characteristics with select process of care measures will be examined.

FINDINGS / RESULTS:

Survey results will be used for classification of VISN 16 primary care sites according to mental health/primary care models. In addition we will examine how variation in the system characteristics effect process measures and help identify the "best practice" for treatment of depressive disorders within the VA primary health care setting. Specific products of this work will include 1) a fully developed and tested survey that documents models of care, barriers and perceived training needs for delivering high-quality MH/SA treatment services in individual PCCs, and 2) automated process of care measures obtainable through VISTA.

STATUS:

Analysis.

IMPACT:

As the VA continues to expand their target population to include non- service connected populations from predominately inpatient specialty care to outpatient care, it is essential that documentation of successful integrated models of mental healthcare in routine primary care clinical settings be done.

PUBLICATIONS: None at this time.